PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE equired to respond to a collection of information unless it displays a valid OMB control number.

		PLICATION	FEE DET	TERMINATIO	N RECORD	,	Application or J	Docket	Number 94 4	0.55
CLAIMS AS EILED DADT I							ENTITY		OTHER TH	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL	. ENTITY	OR	SMALL EN	1TITY
FOR		NUMBER		NUMBER E	EXTRA	RATE	FEE		RATE	FEE
	C FEE FR 1.16(a))	7.19		a maga	FAL (1)		\$	OR	44	\$
	L CLAIMS		33_{minus}	20 = * /	0	x \$	=	OR	x \$=	
INDEPENDENT CLAIMS minus 3 = *						x	=	OR	x=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							=	OR	+=	
* If the c	difference in column) is less then zero, en	er "0" in column	2		тота	L	OR	TOTAL	998,
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						L ENTITY	~~	OTHER TI SMALL EI	
ENT A		CLAIMS REMAINING AFTER AMENDMENT	a i Consta	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(c))	24	Minus	** 33	=	x \$	= /	OR OR	x \$=	
MEN		* 3	Minus	***	=	x	_/	OR	x=	
V	FIRST PRESE	NTATION OF MU	ILTIPLE DEPI	ENDENT CLAIM	(37 CFR 1.16(d))	+/	_=	OR	+=	
(Column 1) (Column 2) (Column 3)						TOTA ADDIT. FE		OR A	TOTAL DDIT. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DWQ.	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	=	OR OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	_=	OR	x=	
Α	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					 	_=	OR	+=	
(Column 1) (Column 2) (Column 3)						TOT ADDIT. F		OR _A	TOTAL DDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	_=	OR OR	x \$=	<u> </u>
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	_=	OR	x=	
\ ▼	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))] [+	_=	OR	+=	
	If the outside and	mn l je lase shan sh	e entry in colu	nn 2, write "0" in colu	ımn 3.	TC ADDIT.	TAL FEE	OR	TOTAL ADDIT. FEE	
**	if the "Highest Nu	mber Previously Pa	id For" IN THI	IS SPACE is less than	20, enter "20".		- 			

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete to complete. Time will vary depending upon the needs of the individual case.

Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.